FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		ORGANIZATION					
		(See instructions	\$)			Office use o	nly
1. NAME OF COMMITTEE (in full)	(Check if name is changed)		nple: If typying, type the lines	12FE4M	5	
ACPAC ACA	INTERNATIONAL	POLITICAL ACTION	ой со	MMITTEE		1111	
ADDRESS (number a	nd street) 4040	W 70TH ST					
(Check if address	ess LLL						
is changed)	MIN	MINNEAPOLIS				554	35
		(CITY		STATE	Z	P CODE 📥
COMMITTEE'S E-M	IAIL ADDRESS (Please	e provide only one e-m	ail addre	ess)			
(Check if address is changed)	ess andi	ew@acainternatio	onal.or	.g 			
io onangoo)							
COMMITTEE'S WE (Check if address is changed)	B PAGE ADDRESS (U	IRL)	.org		1 1 1 1	1111	1 1 1 1 1 1
2. DATE 0	9 / D D / Y	2011					
3. FEC IDENTIFIC	CATION NUMBER	C	C00	034785			
4. IS THIS STATE	EMENT NEV	V (N) OR	X	AMENDED (A)			
I certify that I have exa	mined this Statement and	I to the best of my know	ledge an	d belief it is true, correct and	d complete		
Type or Print Name	of Treasurer	Adam Peterman					
Signature of Treasur	er Electronically File	ed by Adam Pete	rman		Date 0	9 / 1	5 2011
NOTE: Submission of				ne person signing this State			.C. §437g.
Office Use Only				For further information of Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100			FORM 1 sed 02/2009)